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AUDITOR-CONTROLLER

**COUNTY OF LOS ANGELES
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TO: Supervisor Gloria Molina, Chair
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: J. Tyler McCauley 
Auditor-Controller

SUBJECT: **GROUP HOME PROGRAM MONITORING REPORT – LEROY HAYNES
CENTER, INC., LEROY HAYNES GROUP HOME**

We have completed a review of Leroy Haynes Group Home (Group Home or Agency) operated by the Leroy Haynes Center, Inc. The Group Home contracts with the Department of Children and Family Services (DCFS) and the Probation Department (Probation).

Leroy Haynes Group Home is a 72-bed facility, which provides care for boys ages 7-16 years who exhibit behavioral, social, and emotional difficulties. At the time of the monitoring visit, Leroy Haynes Group Home was providing services for 55 Los Angeles County DCFS children and 15 Los Angeles County Probation children. Leroy Haynes Group Home is located in the Fifth District.

Scope of Review

The purpose of the review was to determine whether the Agency was providing the services outlined in their Program Statement. Additionally, the review covered basic child safety and licensing issues, and included an evaluation of the Agency's Program Statement, internal policies and procedures, child case records, facility inspections, and interviews with seven children placed in the Group Home at the time of the review. Interviews with the residents were designed to obtain their perspectives on the program services provided by the Agency, and to ensure adherence to the Foster Youth Bill of Rights.

"To Enrich Lives Through Effective and Caring Service"

Summary of Findings

The Agency was not always providing the services outlined in their Program Statement. Specifically, the Agency needs to make numerous repairs to its facility; provide each resident with a complete initial diagnostic assessment within 30 days of being admitted; maintain current Needs and Services Plans and quarterly reports for each resident; provide documentation to show each placement worker's participation in the development and update of the Needs and Services Plans; maintain documentation to show evidence of residents receiving regular individual and/or group therapy; instruct staff to treat each resident with respect and dignity and monitor the staffs' behavior; notify residents that they can attend weekly religious services of their choice; inform each resident of their right to refuse medication; provide each resident with the \$50 monthly clothing allowance; provide a sufficient quantity of clothing for each resident; allow residents to choose their own clothes; and provide each resident with regular opportunities to maintain a photo album/life book.

Attached is a detailed report of the review findings.

Review of Report

We discussed our report with the Agency's management. The Agency's management is required to provide a corrective action plan to the Children's Group Home Ombudsman within 20 business days from the date of this report. We thank the management and staff for their cooperation during our reviews.

If you have any questions, please contact me, or have your staff contact Mike Pirolo at (626) 293-1110.

JTM:MP:CC:bg

c: David E. Janssen, Chief Administrative Officer
David Sanders, Ph.D., Director, DCFS
Paul Higa, Acting Chief Probation Officer
Darrel Paulk, Executive Director, Leroy Haynes Center, Inc.
Violet Varona-Lukens, Executive Officer
Public Information Office
Audit Committee

**Leroy Haynes Center, Inc.
Leroy Haynes Group Home
233 West Baseline Road
La Verne, CA 91750
Phone: (909) 593-2581
License No.: 191501972
Rate Classification Level: 12**

I. Facility and Environment

(Facility Based - No Sample)

Method of assessment – Observation and resident interviews

Sample size for resident interviews: Seven

Comments:

Leroy Haynes Group Home (Group Home or Agency) is a large facility located in a residential neighborhood. The Group Home is clean, spacious, and comfortable. The exterior of the Group Home is well maintained, nicely landscaped, and blends well with the other homes on the block.

The facility has six residential dormitory style cottages: Burton, Dow, Gatchell, Swain, Thurber and Wittry. Each cottage has a small kitchenette where weekend meals are prepared along with snacks. The resident bedrooms are spacious, and personalized to each child's desire with posters, pictures, and knick-knacks. However, the interior of the Group Home needs improvement.

Carpeting throughout each cottage is stained, dirty, and worn. In several bedrooms in each cottage, there is writing on the furniture, walls, and inside closets. Several windows throughout the cottages are scratched, and there are no wash cloths available for the residents. The kitchen walls, oven, and stove in each cottage are dirty.

In Burton cottage, knobs are missing on the upper closet door in bedroom number one. In bedroom number four, there is a hole in the desk.

In Dow cottage, the wall inside the closet in bedroom number three has a hole exposing the plumbing. The smoke detector in the downstairs hall is missing a cover. There is mold and mildew around the shower area, and the bathroom door frame is missing. Window blinds and curtains in the downstairs bedrooms are broken, missing, torn, and/or not hung properly.

In Gatchell cottage, the door frame in bedroom number five is missing exposing sharp edges which presents a safety hazard. There is a hole in the ceiling of bathroom number two. Lighting throughout the cottage is low.

In Swain cottage, there is mold and mildew around the bathroom shower area.

In Thurber cottage, the bathroom sink faucets are broken, tile is missing and broken around the sinks, there is mold and mildew around the bathroom shower area.

In Wittry cottage, a kitchen drawer is broken with exposed sharp nails presenting a safety hazard.

The Group Home maintains age-appropriate and accessible recreational equipment. There are also board games, TVs, and VCR/DVD players. There are books and resource materials, including computers with a variety of programs.

In the main dining hall and kitchen, there is a sufficient supply of frozen food, meat, canned goods, bakery items, and fresh fruit. The food is accessible, appropriately dated, and properly stored.

Recommendations

1. Leroy Haynes Center, Inc., management:

- a. Clean/replace carpeting throughout the facility as needed.
- b. Remove writing from the furniture, walls and inside closets in the residents' bedrooms.
- c. Repair/replace scratched windows in the cottages as needed.
- d. Provide residents with wash cloths.
- e. Thoroughly clean the kitchen walls, stove, and oven in each cottage.
- f. Replace the knobs on the upper closet door in bedroom number one in Burton cottage.
- g. Repair the desk in bedroom number four in the Burton cottage.
- h. Repair the wall inside the closet in bedroom number three in Dow cottage.
- i. Repair the missing bathroom door frame in Dow cottage.
- j. Replace the smoke detector cover in the downstairs hall in Dow cottage.
- k. Repair/replace the window blinds and curtains in the downstairs bedrooms in Dow cottage as needed.

- l. Clean the mold and mildew from around the bathroom showers in Dow, Swain, and Thurber cottages.**
- m. Repair the door frame in bedroom number five in Gatchell cottage.**
- n. Provide adequate lighting in Gatchell cottage.**
- o. Repair the hole in the ceiling in bathroom number two in Gatchell cottage.**
- p. Repair/replace the broken bathroom sink faucets in Thurber cottage.**
- q. Repair/replace the tile around the bathroom sinks in Thurber cottage.**
- r. Repair the kitchen drawer in Wittry cottage.**

II. Program Services

Method of assessment – Review of relevant documents and resident interviews

Sample size for resident interviews: Seven

Comments:

The residents meet the Agency's population criteria as outlined in their Program Statement. One resident did not receive a complete initial diagnostic assessment after being admitted into the Agency's program.

There are no Needs and Services Plans (NSPs) for five of the residents. There was documentation to support the placement workers' participation in the development and update of the NSPs for two of the residents.

Five of the residents did not have current quarterly reports.

The residents are provided with psychological testing, emotional and developmental counseling as required by the Program Statement. However, the case files do not reflect adequate documentation to show evidence that five of the residents are receiving regular individual and/or group therapy.

Recommendations

2. Leroy Haynes Center, Inc., management:

- a. Provide each resident with a complete initial diagnostic assessment within 30 days of being admitted into the program.**
- b. Maintain current Needs and Services Plans for each resident.**
- c. Maintain current quarterly reports for each resident**
- d. Provide documentation to show placement workers' participation in the development and update of the Needs and Services Plans.**
- e. Maintain documentation to show evidence of residents receiving regular individual and/or group therapy.**

III. Educational and Emancipation Services

Method of assessment – Review of relevant documents and resident interviews

Sample size for resident interviews: Seven

Comments:

Residents are attending school. There are current Individualized Educational Plans for both residents who require Special Education services. Their records contain current semester report cards and/or progress reports. Residents reported that they are provided with a sufficient amount of daily educational stimulation away from school and feel that the Group Home is supportive of their academic progress.

The Agency's program includes the development of residents' daily living skills. Residents are involved in the planning and preparation phase of meals. Hygiene care is discussed as needed and employment preparation encouraged.

Residents are offered opportunities to participate in emancipation and vocational programs as appropriate.

Residents have the opportunity to work and manage their own money.

Recommendations

There are no recommendations for this section.

IV. Recreation and Activities

Method of assessment – Review of relevant documents and resident interviews

Sample size for resident interviews: Seven

Comments:

The Agency provides its residents opportunities to participate in recreational activities. Residents expressed satisfaction with the recreational activities and stated that the recreation schedules are followed.

The Group Home utilizes local community organizations for recreational and program resources. Residents reported that they participate in planning some of the activities. Residents have free time and are able to participate in self-selected activities.

Transportation is provided to and from the activities.

Recommendations

There are no recommendations for this section.

V. Psychotropic Medication

Method of assessment – Review of relevant documents for 44 case files

Comments:

Residents have current court authorizations for psychotropic medications. Documentation confirms that the children are routinely seen by the prescribing psychiatrist.

Medication distribution logs are properly maintained.

Recommendations

There are no recommendations for this section.

VI. Personal Rights

Method of assessment – Resident interviews

Sample size for resident interviews: Seven

Comments:

Residents expressed satisfaction with the Agency and its staff. Residents participate in an initial orientation and the Group Home's policies and procedures are posted. Six of the residents reported that they feel safe in the Group Home and that there is no interference with their daily living functions. One resident stated that he did not feel safe in the home as other residents often "picked" on him. This was discussed with the Group Home Director who stated that an investigation would be conducted.

Six residents reported satisfaction with the taste of the food and with their ability to participate in menu development. One resident expressed dissatisfaction with the food. Residents reported that there is sufficient staff supervision and six of the residents expressed satisfaction with the quality of their interactions with staff. One resident reported that one particular staff was not nice to him. This was discussed with the Group Home Director who stated this matter would be addressed. Residents feel there is at least one staff member they can easily talk to and trust.

Residents reported that they are assigned chores to complete on a daily basis that are reasonable and not too demanding. Residents are able to have visitors and to make and receive personal telephone calls. They are permitted to contact their placement workers, attorneys, and family members as needed. Six residents are able to attend weekly religious services of their choice. One resident stated that he was not notified that he could attend weekly religious services of his choice. Residents feel that the Agency is respectful of their cultural lifestyles. The Agency allows the residents to celebrate different holidays.

Residents reported that the discipline policies are consistently enforced and there are fair and appropriate consequences for inappropriate behavior.

Three of the residents are not aware of their right to refuse medication.

Recommendations

3. Leroy Haynes Center, Inc., management:

- a. Instruct staff to treat each resident with respect and dignity and monitor their interactions.**
- b. Notify residents that they can attend weekly religious services of their choice.**

- c. Inform each resident of their right to refuse medication.

VII. Clothing and Allowance

Method of assessment – Review of relevant documents and resident interviews

Sample size for resident interviews: Seven

Comments:

The Agency provides appropriate clothing, items of necessity, and allowances to the residents. Clothing provided to the residents is of good quality. However, one resident reported that he is not given the opportunity to select some of his own clothes. Another resident only had one pair of shoes, and another resident was in need of numerous clothing items. There is no documentation to support that the Group Home supplies its residents with the required \$50 monthly clothing allowance, and the Group Home does not maintain on-going clothing inventories for the residents. This was discussed with the Group Home Director who stated that the Group Home was in the process of obtaining vouchers for residents to shop at local stores in the community.

The Agency provides residents with the required minimum base allowance, which they are able to increase according to the Agency's behavioral system. Residents are permitted to spend their allowances as they choose.

The Agency provides residents with adequate personal care items and adequate storage.

One resident is not provided with regular opportunities to maintain a photo album/life book.

Recommendations

4. Leroy Haynes Center, Inc., management:

- a. Provide each resident with the required \$50 monthly clothing allowance.
- b. Provide a sufficient quantity of clothing for each resident.
- c. Allow residents to choose their own clothes.
- d. Provide each resident with regular opportunities to maintain a photo album/life book.